712000067366

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2012

THOMAS DUGGAR 1391 TIMBERLANE RD TALLAHASSEE, FL 32312

SUBJECT: MIDTOWN CLASSICAL LLC

Ref. Number: W12000035897

We have received your document for MIDTOWN CLASSICAL LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 612A00018236

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Midtown Classical, LL	C .			
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the art	ticles of incorporation and a check for:			
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
	ADDITIONAL COLT REQUIRED			
FROM: Thomas L. Duggar	e (Printed or typed)			
1391 Timberlane Road	Address			
Tallahassee, FL 32312	, State & Zip			
(850) 386-6124 Daytime	Telephone number			
Thomas@DuggarandDu E-mail address: (to be use	Iggar.com ed for future annual report notification)			

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: Midtown	Olassical,	Inc.
Principal office Principal street address 1311 Timbrelen Road all Dissart Dissar P.A. Tallahassa, FL 32312	Mailing address	s, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
ARTICLE IV SHARES	3210 Wyork	15 212. 32312.
The number of shares of stock is:	~ 3 m	
Name and Title: Address: Address: Addre	Name and Title: Address:	
Name and Title: Stai W. Duage / Arosched Address: 12312 La arcice Gue	· · · · · · · · · · · · · · · · · · ·	
Name and Title:Address:		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of t	the resistant agent in	TALLAL J
Name: Address: 1361 Timber lane Race AHn: Ougar + Ougar PA Tall FL 32312.	ne registered agent is:	LIB PR
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is: Name: Address: Nume: Nu		
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as regis	for the above stated corporation tered agent and agree to act in th	at the place designated in his capacity
Required Signature/Registered Agent		Data
I submit this document and affirm that the facts stated herein are to document to the Department of State constitutes a third degree felony.		
Required Signature/Incorporator		Date